

SECOND REGULAR SESSION

SENATE BILL NO. 804

92ND GENERAL ASSEMBLY

INTRODUCED BY SENATOR FOSTER.

Pre-filed December 1, 2003, and ordered printed.

TERRY L. SPIELER, Secretary.

2704S.02I

AN ACT

To repeal section 198.086, RSMo, and to enact in lieu thereof one new section relating to the Alzheimer's Demonstration Project.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Section 198.086, RSMo, is repealed and one new section enacted in lieu thereof, to be known as section 198.086, to read as follows:

198.086. 1. The department of health and senior services shall develop and implement a demonstration project designed to establish a licensure category for health care facilities that wish to provide treatment to persons with Alzheimer's disease or [Alzheimer's-related] **other dementia as defined by licensed psychiatrists**. The [division] **department** shall also:

- (1) Inform potential providers of the demonstration project and seek letters of intent;
- (2) Review letters of intent and select provider organizations to participate in the demonstration project. Ten such organizations may develop such projects using an existing license and additional organizations shall be newly licensed facilities with no more than thirty beds per project. One demonstration project shall be at a stand-alone facility of no more than one hundred twenty beds designed and operated exclusively for the care of residents with Alzheimer's disease or **other** dementia within a county of the first classification with a charter form of government with a population over nine hundred thousand. A total of not more than three hundred beds may be newly licensed through the demonstration projects. All projects shall maintain their pilot status until a complete evaluation is completed by the [division of aging] **department**, in conjunction with a qualified Missouri school or university, and a written determination is made from such

EXPLANATION—Matter enclosed in bold-faced brackets [thus] in this bill is not enacted and is intended to be omitted in the law.

evaluation that the pilot project is successful;

(3) Monitor the participants' compliance with the criteria established in this section;

(4) Recommend legislation regarding the licensure of dementia-specific residential care **and skilled nursing facilities** based on the results of the demonstration project; and

(5) Submit a report regarding the [division's] **department's** activities and recommendations for administrative or legislative action on or before November fifteenth of each year to the governor, the president pro tem of the senate and the speaker of the house of representatives.

2. The director of the [division of aging] **department** shall:

(1) Develop a reimbursement methodology to reasonably and adequately compensate the pilot projects for the costs of operation of the project, and require the filing of annual cost reports by each participating facility **in the state Medicaid program** which shall include, but not be limited to, the cost equivalent of unpaid volunteer or donated labor. **For each participating facility that does not receive reimbursement from the state Medicaid program, that facility shall only file a cost report relating to its activities based programming;**

(2) Process the license applications of project participants;

(3) Monitor each participant to assure its compliance with the requirements and that the life, health and safety of residents are assured;

(4) Require each participating facility to complete a minimum data set form for each resident occupying a pilot bed;

(5) Require the [division of aging] **department** to assign a single team of the same surveyors to inspect and survey all participating facilities at least twice a year for the entire period of the project; and

(6) Submit to the president pro tem of the senate and speaker of the house of representatives copies of any statements of deficiencies, plans of correction and complaint investigation reports applying to project participants.

3. Project participants shall:

(1) Be licensed by the [division of aging] **department**;

(2) Provide care only to persons who have been diagnosed with Alzheimer's disease or [Alzheimer's-related dementia] **other dementia**;

(3) Have buildings and furnishings that are designed to provide for the resident's safety. Facilities shall have indoor and outdoor activity areas, and electronically controlled exits from the buildings and grounds to allow residents the ability to explore while preventing them from exiting the facility's grounds unattended;

(4) Be staffed twenty-four hours a day by the appropriate number and type of personnel necessary for the **appropriate license type chosen by the provider and for the proper care of residents and upkeep of the facility**;

(5) Conduct special staff training relating to the needs, care and safety of persons with Alzheimer's disease or [Alzheimer's-related] **other** dementia within the first thirty days of employment;

(6) Utilize personal electronic monitoring devices for any resident whose physician recommends use of such device;

(7) Permit the resident's physician, in consultation with the family members or health care advocates of the resident, to determine whether the facility meets the needs of the resident;

(8) Be equipped with an automatic sprinkler system, in compliance with the National Fire Protection Association Code 13 or National Fire Protection Association Code 13R, and an automated fire alarm system and smoke barriers in compliance with the 1997 Life Safety Codes for Existing Health Care Occupancy; and

(9) Implement a social model for the residential environment rather than an institutional medical model.

4. For purposes of this section, "health care facilities for persons with Alzheimer's disease or [Alzheimer's-related] **other** dementia" means facilities that are specifically designed and operated to provide **care for** elderly individuals who have [chronic] **various physical needs as well as various ranges of mild to chronic** confusion or dementia [illness], or both, with a safe, structured but flexible environment that encourages physical activity through a well-developed recreational and aging-in-place [and] activity program. Such program shall continually strive to promote the highest practicable physical and mental abilities and functioning of each resident.

5. Nothing in this section shall be construed to prohibit project participants from accommodating a family member or other caregiver from residing with the resident in accordance with all life, health, and safety standards of the facility.

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